## COMBINED DECLARATION AND POWER OF ATTORNEY

(ORIGINAL, DESIGN, NATIONAL STAGE OF PCT, SUPPLEMENTAL, DIVISIONAL, CONTINUATION, OR C-I-P)

As below named inventor, I hereby declare that:

#### TYPE OF DECLARATION

This declaration is for an original application.

## INVENTORSHIP IDENTIFICATION

My residence, post office address and citizenship are as stated below, next to my name. I believe that I am the original, first inventor of the subject matter that is claimed, and for which a patent is sought, on the invention entitled:

# CORONARY SINUS APPROACH FOR REPAIR OF MITRAL VALVE REGURGITATION

#### SPECIFICATION IDENTIFICATION

The specification is filed herewith.

## ACKNOWLEDGMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information, which is material to patentability as defined in 37, Code of Federal Regulations, Section 1.56, and which is material to the examination of this application, namely, information where there is a substantial likelihood that a reasonable Examiner would consider it important in deciding whether to allow the application to issue as a patent, and in compliance with this duty, there is attached an information disclosure statement, in accordance with 37 C.F.R. Section 1.98.

## POWER OF ATTORNEY

I hereby appoint the following practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.

APPOINTED PRACTITIONER(S)	REGISTRATION NUMBER(S)
Alan M. Krubiner	29,289
Janis J. Biksa	33,648
Michael J. Jaro	34,472
Catherine C. Maresh	35,268
James F. Crittenden	39,560
William L. Haynes	48,151

# DIRECT ALL CORRESPONDENCE TO CUSTOMER NUMBER: 28390

Medtronic Vascular, Inc. IP Legal Dept.

3576 Unocal Place Santa Rosa, CA 95403

# DIRECT TELEPHONE CALLS TO:

William L. Haynes 978-739-3250 (EDT)

## DECLARATION

I further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full Name of Sole Inventor:

Inventor's signature:

Date:

Ghaleb Sate

22 Lexington Drive

Residence Address: Post Office Address:

Country of Citizenship

Acton, Massachusetts 01720

US